

Unit # \_\_\_\_\_ District # \_\_\_\_\_

Office use only/Rcvd

**2023 MEMBERSHIP TRANSMITTAL FORM**



Mail to: American Legion Auxiliary  
 Department of Oklahoma  
 PO Box 14562  
 Oklahoma City, OK 73113

Phone: (405) 252-4143

Include all PUFL Members with your first mailing of 2023 membership.  
 If PUFL members are deceased, return a Member Data form with supporting documents.

	MEMBERSHIP # <i>(if new, leave blank)</i>	LAST NAME <i>(list in alphabetical order)</i>	FIRST NAME	PUFL / NEW SR / JR	SR \$ 21.00 JR \$ 5.00
1					\$
2					\$
3					\$
4					\$
5					\$
6					\$
7					\$
8					\$
9					\$
10					\$
11					\$
12					\$
13					\$
14					\$
15					\$
16					\$
				<b>SUBTOTAL</b>	\$
			<b>BACK PAGE</b>	<b>TOTAL</b>	\$

PLEASE COMPLETE THE FOLLOWING:

Check # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_  
 Date \_\_\_\_\_ Signed \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*Make a copy for Unit records*

*Send a copy to District with District dues.*

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	MEMBERSHIP # <i>(if new, leave blank)</i>	LAST NAME <i>(list in alphabetical order)</i>	FIRST NAME	PUFL / NEW SR / JR	SR \$ 21.00 JR \$ 5.00
17					\$
18					\$
19					\$
20					\$
21					\$
22					\$
23					\$
24					\$
25					\$
26					\$
27					\$
28					\$
29					\$
30					\$
31					\$
32					\$
33					\$
34					\$
35					\$
36					\$
37					\$
38					\$
39					\$
40					\$
41					\$
42					\$
				<b>TOTAL</b>	\$